SUMMARY

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"Passive Smoking: How Great a Hazard?"

Huber et al. feel that, to date, there haven't been any conclusive studies on the effects of ETS. They state one problem is that the components of ETS have only been inferred from the constituents of mainstream smoke. "Only 14 of the 50 biologically active 'probable constituents' of ETS listed by the Surgeon General **actually** have been measured or demonstrated at any level in ETS." According to the authors, ETS cannot be quantified with the technology that exists. Attempts to find ETS through constituent markers, (i.e., nicotine in the air implies ETS is present), have failed. Therefore, it is hard to determine the effects of ETS when it cannot be measured or its components verified.

A number of diseases in non-smokers have been allegedly connected to ETS. Huber et al. discuss the alleged connection between lung cancer and ETS as an example of the weak methodology that associates ETS and certain diseases. For instance, there have been thirty studies related to linking lung cancer and ETS. Twenty-seven of them concluded the effects of exposure based on already available data. All of the studies report a weak relative risk factor. The authors define a weak ratio between 1 and 3. The lowest reported relative risk was the Wu-Williams study with a 0.7 and the highest risk was 3.25 by Gillis et al.

In the case of the Wu-Williams study, they found such a low relative risk factor, this would imply that there is a negative relationship between lung cancer and ETS. The confounding factors were not taken into consideration. As a matter of fact, all the studies have failed to take into account confounding factors such as nutrition and dietary prevention, exposure to occupational carcinogens and various air pollution, etc.

Huber et al. conclude that actions taken by companies and government to ban smoking is a result of political and emotional needs rather than a conclusion based on science.

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